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CONFIRMATION NO. 5780

<b>SERIAL NUMBER</b> 10/729,796	<b>FILING OR 371(c) DATE</b> 12/09/2003 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2629	<b>ATTORNEY DOCKET NO.</b> ADAMK.001A
<b>APPLICANTS</b> Adam S. Kaplan, Residence Not Provided;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/431,710 12/09/2002				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 03/09/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>Michael Peran</i> Acknowledged <i>4P</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 20995				
<b>TITLE</b> Method and apparatus for user interface				
<b>FILING FEE RECEIVED</b> 493	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	